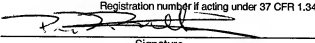
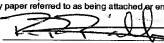


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 104978-0172	
Application Number 10/632,947-Conf. #4975		Filed July 31, 2003	
For ANTIOXIDANT SENSOR			
Art Unit 1795		Examiner K. K. Olsen	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$120	Small Entity Fee \$60 \$ _____
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$460	\$230 \$ _____
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1050	\$525 \$ 1,050.00
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1640	\$820 \$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2230	\$1115 \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input checked="" type="checkbox"/> Payment by credit card via EFS-Web.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any underpayment of fees, or credit any overpayment, to Deposit Account Number 141449 .			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number 59,659			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 Signature		June 26, 2008 Date	
_____ Rory P. Pfeiffer Typed or printed name		_____ (617) 439-2000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of 1 forms are submitted.			

Three Month Request for Extension of Time Under 37 CFR 1.136(a)	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: June 26, 2008	Signature:  (Rory P. Pfeiffer)